

April 13, 2011

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Office of Statewide Health Planning and Development  
1600 Ninth Street, Room 433  
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Doug Sale  
Acting Executive Director  
California Workforce Investment Board  
777 12th Street, Suite 200  
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Dear Dr. Carlisle and Mr. Sale,

On behalf of the Executive Team and the Leadership Council for the California Regional Action Coalition (CA RAC) for *The Future of Nursing: Campaign for Action*, I want to provide an overview of our work to inform the Health Care Workforce Council in preparing California's application for education and practice funding for California's healthcare workforce. California is one of the five states designated by the Robert Wood Johnson Foundation (RWJF) and the AARP to pilot the implementation of the recommendations from the Institute of Medicine's (IOM) Initiative on the Future of Nursing (IFN). Implementation of the recommendations is nationally recognized as *The Future of Nursing: Campaign for Action*. An additional 10 states have also recently been recognized by RWJF and AARP as regional action coalitions to implement the recommendations.

The IOM IFN Recommendations are a framework for implementing change that will increase nursing's contribution to health care and enhance the state's ability to provide care to the people of California that is accessible, affordable, and improves health outcomes. However, the framework must be within the context of California's current health care community and the efforts underway in implementing health care reform changes in the state; thus, we want to ensure that the work that we will be doing is closely aligned with the work of the Council and leverages your objectives, while having your work enhance ours.

The recommendations were released in October 2010, following a two year in-depth investigation into the contributions that the nursing profession could make in increasing access to affordable, safe and quality care for the 32 million Americans that will be added to the health care rolls as a result of the Affordable Care Act. The 18-member committee (with only five members who were nurses) examined the evidence supporting the potential that the nursing profession holds for health care reform. As a result of its deliberations, the IOM Committee formulated four key messages that structured the discussions and recommendations presented in the IOM report. Eight major recommendations supported these messages that the committee felt needed to be implemented in order for nursing's contribution to improving the health of our

communities to be fully realized. Although the recommendations provide a framework for states' to act, they also include several "sub-recommendations" that are expected to be carried out at the federal and national level to enhance states' abilities to actualize the recommendations.

The key messages are:

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other health professionals, in redesigning health care in the United States.
- Effective workforce planning and policy making require better data collection and an improved information infrastructure.

Recommendations supporting these messages are fully in line with what is needed in California to ensure that our state's nurses are prepared to respond to the new demands being driven by health care reform. Thus, the IFN has been readily embraced by the California Institute for Nursing & Health Care (California's nationally recognized nursing workforce center), nursing education, health care associations, professional organizations, hospitals and health systems, and growing numbers of nurses as stakeholders in the profession's future.

As we formed the CA RAC we felt that there were some important principles that we needed to follow. These included:

1. Build upon work currently underway that supports the IFN recommendations as well as locally initiated activities, and link these efforts to the statewide process, thus creating a consistent message and a clear focus.
2. Ensure that the IFN work is aligned with other efforts underway to address health care reform in California.
3. Engage diverse stakeholders in IFN and build visibility and engagement of the IFN with the community at large.
4. Carry the message: **It is not about nursing, it is about the health of our communities.**
5. Build a communication strategy that links the work groups and local initiatives together, increases and makes visible the work to the overall community, and ensures that consistent messages are delivered.

We began our work in December 2010, following a national summit held in Washington D.C., which launched the implementation of the IOM Recommendations, with the building of a Leadership Council for the CA RAC and identifying non-nursing co-leads. The Leadership Council is made up of representatives of the state's key stakeholder groups, including associations and organizations, co-leads of the work groups, and Regional Champions, and is lead by the Executive Team. The Executive Team was designated by RWJF and AARP, with the addition of the non-nursing co-leads, and reports to them on our ongoing work. The Leadership Council oversees development of action steps by the work groups, engages stakeholders across sectors and the state, and is the champion of the IFN in California. The work group co-leads will provide leadership for developing the action steps that are needed to implement the recommendations. The Regional Champions, identified for 8 of the state's regions, will ensure regional engagement and link local efforts to statewide efforts. Non-nursing co-leads will help engage the broader community, beyond nursing, as stakeholders in the campaign. CA RAC non-

nursing co-leads are Former Assemblyman Juan Arambula and Jeff Oxendine, Co-director of the California Health Workforce Alliance.

The purposes of the CA RAC are:

- Engage a diverse group of stakeholders to develop a blueprint for implementation of the recommendations as outlined in the IFN Report.
- Develop state-prioritized recommendations that maximize the capacity of the California nursing workforce to meet the demands of our evolving health care system that is responsive to the needs and priorities of the populations we serve.
- Promote changes throughout healthcare delivery systems that emulate the state-specific recommendations for IFN implementation.
- Provide leadership in changes to public and institutional policies at the local, state and national levels that draw on nurses' expertise to improve the health of communities.
- Build visibility and engagement of the IFN with the community at large.
- Develop a strategic plan for securing funding and ongoing support of the implementation of the CA RAC recommendations.

Work Groups for each of the eight recommendations are being established. We have prioritized which recommendations to address first, while creating the structure to support the remainder. The first recommendations (First Tier) being addressed are those that represent major progress already underway in California and have had task forces working on related initiatives.

### **First Tier Work Groups**

Recommendation #3 – Residencies/Transition to Practice Programs: Work group will build upon transition to practice programs for new graduates that are already underway to bridge education to practice and incorporate the statewide conversations taking place that are addressing the value of residencies in nursing education.

Recommendation #4 – More BSN prepared nurses: Work group will build upon the collaborative model of nursing education already underway with 41 schools of nursing, creating structures for seamless progression from an associate to BSN degree and implementing the important academic changes that AB1295 will bring to decrease barriers to progression by eliminating duplicate courses in associate and BSN degree completion nursing programs.

Recommendation #7 – Nurses prepared to serve in leadership roles: Work group will build upon missions that exist for both the Association for California Nurse Leaders and the Betty Irene Moore School of Nursing, UC Davis.

Recommendation #8 – Data for workforce planning: This work group will build upon the workforce and school of nursing databases already produced by the BRN, addressing gaps in data collection. This recommendation is consistent with the workforce data charge given to OSHPD by the California legislation.

### **Second Tier Work Groups**

Recommendation #1 – Scope of practice: This recommendation is receiving a great deal of attention and interest. The intent is to maximize nurses' ability to practice and provide healthcare within current scope of practice, as allowed by state law and regulations.

Recommendation #2 – Changing practice models and innovation: This recommendation is also receiving a great deal of interest and is expected to address new and innovative practice models that build upon interprofessional collaboration.

### **Third Tier Work Groups**

Recommendation #5 – Increase number of doctorally prepared nurses: Conducting an inventory of California's current capacity to educating doctorally prepared nurses and modeling capacity by 2020 to inform the Leadership Council on next steps.

Recommendation #6 – to be determined.

Implementation of the recommendations will provide an opportunity to create new partners in the community. We see that this is mandatory in order for the implementation to be a success. The CA RAC will embrace those inside and outside the nursing community to build a movement for change that transforms the role of nurses in delivering high quality and affordable care within the evolving health care systems. Partners in this effort need to include physicians, employers, policy makers, funders, consumers, payers, state agencies, educators, and, of courses, nurses themselves.

As the California Health Workforce Council moves forward to ensure that California has the health care workforce needed to respond to the demands of health care reform, the California Regional Action Coalition and the California Institute for Nursing & Health Care looks forward to working with you in realizing the potential benefits that health care reform brings to the people of California.

Sincerely,



Deloras Jones, RN, MS  
Executive Director CINHC and Co-lead CA RAC

Executive Team for the California RAC (as designated by RWJF and non-nursing co-leads):

1. Juan Arambula – former State Assemblyman – co-lead
2. Mary Dickow – UCSF, Director of RWJF Executive Nurse Leaders Fellows
3. Deloras Jones – California Institute for Nursing & Health Care – co-lead
4. Stephanie Leach – Kaiser Permanente, California Team Leader to the Center to Champion Nursing in America (under AARP and RWJF)
5. Gloria McNeal – Charles Drew University, Mervyn M. Dymally School of Nursing
6. Ed O'Neil – UCSF, Center for Health Professions
7. Jeff Oxendine – California Health Workforce Alliance – co-lead
8. Marybeth Sharpe – Gordon & Betty Moore Foundation
9. Heather Young – UC Davis, Betty Irene Moore School of Nursing